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**NORTH WALES MENTAL HOSPITAL
MANAGEMENT COMMITTEE**

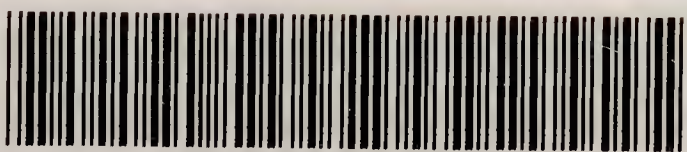


ANNUAL REPORT

FOR THE YEAR

1961

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**NORTH WALES MENTAL HOSPITAL
MANAGEMENT COMMITTEE**



ANNUAL REPORT

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NORTH WALES MENTAL HOSPITAL MANAGEMENT COMMITTEE

Chairman:

Alderman DAVID TUDOR, M.B.E., J.P., Dilwyn, Trawsfynydd.

Vice-Chairman:

T. W. JOHNSON, Esq., Wynford, Rhyl Road, Denbigh
(Chairman of the Finance Sub-Committee).

Members:

Dr. GEOFFREY WILLIAMSON, Bryn Pydew, Tynygroes, Conway.

Councillor W. R. WEBB, Ty'n Llwyn, Carrog, Corwen.

J. M. WATKINS, Esq., 29 New Street, Portmadoc.

Mrs. E. WYN JONES, J.P., Llety'r Eos, Llanfairtalhaiarn.

Councillor the Rev. D. J. M. WILLIAMS, The Rectory, Llansadwrn
(who are appointed for the period ending 31st March, 1963).

Councillor ERNEST PRICE, J.P., 65 Mold Road, Wrexham
(Chairman of the General Purposes Sub-Committee).

Dr. A. W. HILL, 36 Chester Road, Wrexham.

Mrs. FRANCIS WILLIAMS, J.P., Llys Meirchion, Henllan.

Councillor R. C. G. JONES, Llawndy Farm, Talacre, Holywell
(who are appointed for the period ending 31st March, 1964).

Alderman O. R. E. JONES, J.P., Cafnan, Cemaes Bay
(Chairman of the Works, Engineering and Estate Sub-Committee).

Mrs. ELEANOR OWEN, Ty Ucha, Llanelltyd, Dolgellau.

Dr. T. GWYNNE WILLIAMS, Trefeirian, Denbigh.

Councillor EMYR HUGHES, Awelon, Maesdu Avenue, Llandudno.

Alderman Lt.-Col. LEWIS WILLIAMS, J.P., Inveruca, Barmouth
(who are appointed for the period ending 31st March, 1965).

Secretary:

SIDNEY L. FROST, F.H.A.

Finance Officer and Deputy Secretary:

C. DEAKIN, B.A.(Admin.), F.H.A.

Supplies Officer:

ALFRED H. LUCAS, F.H.A., A.R.S.H.

Superintendent Engineer and Clerk of Works:

R. GLYN PRITCHARD, M.I.H.E., M.I.E.C.

HOUSE COMMITTEES

NORTH WALES HOSPITAL FOR NERVOUS AND MENTAL DISORDERS, DENBIGH, AND POOL PARK HOSPITAL, NEAR RUTHIN

T. W. JOHNSON, Esq. (Chairman).

Mrs. E. WYN JONES, J.P.	C. GWYNN HUGHES, Esq., J.P.
Mrs. FRANCIS WILLIAMS, J.P.	D. W. THOMAS, Esq.
E. H. CLEMENT, Esq., B.A., B.Litt.	Dr. T. GWYNNE WILLIAMS.
D. H. GRIFFITHS, Esq.	Dr. GEOFFREY WILLIAMSON.

OAKWOOD PARK HOSPITAL, NEAR CONWAY.

Alderman DAVID TUDOR, M.B.E., J.P. (Chairman).

Miss NORA F. CHESTER, M.B.E.	Counc. EMYR HUGHES.
Mrs. OLWEN DAVIES.	Dr. M. T. ISLWYN JONES.
Mrs. E. WYN JONES, J.P.	Dr. D. E. PARRY-PRITCHARD,
Mrs. G. M. LLOYD JONES.	O.B.E.
Mrs. HUGH PRITCHARD.	Dr. J. H. O. ROBERTS, O.B.E., J.P.
Mrs. H. M. ROBERTS.	G. T. REES, Esq.
Miss DOROTHY STOKES.	

BROUGHTON HOSPITAL, NEAR CHESTER.

Councillor ERNEST PRICE, J.P. (Chairman).

Mrs. D. KENYON.	Counc. E. G. ROBERTS, J.P.
Miss W. YATES, J.P.	Dr. G. WYN ROBERTS.

COED DU HALL, RHYDYMWYN.

Mrs. FRANCIS WILLIAMS, J.P. (Chairman).

Mrs. P. R. DAVIES-COOKE.	Miss W. YATES, J.P.
Mrs. J. D. HOTHAM.	Alderman H. HAMPSON, J. P.
Mrs. FLORENCE JONES.	Dr. M. T. ISLWYN JONES.
Mrs. J. C. MATHER.	Dr. G. WYN ROBERTS.

LLWYN VIEW AND GARTH ANGHARAD, DOLGELLAU.

Alderman DAVID TUDOR, M.B.E., J.P. (Chairman).

Mrs. M. MAELOR JONES.	Dr. E. RICHARDS.
Mrs. ELEANOR OWEN.	Ald. Lt.-Col. LEWIS WILLIAMS,
Ald. E. J. EVANS, J.P.	J.P.
D. R. MEREDITH, Esq.	

NORTH WALES HOSPITAL FOR NERVOUS AND MENTAL DISORDERS

MEDICAL STAFF.

PSYCHIATRY.

Consultants:

J. H. O. ROBERTS, O.B.E., M.D. (Lond.), D.P.M., J.P.
(Medical Superintendent).
GEOFFREY WILLIAMSON, M.B., Ch.B. (Manchester), D.P.M.
T. GWYNNE WILLIAMS, M.D. (Lond.), D.P.M.
ALEXANDER CRAIG, M.B., Ch.B. (Edin.), D.P.M.
DAVID N. PARFITT, M.D. (Lond.), M.R.C.P., D.P.M.

Senior Hospital Medical Officers:

D. OWEN LLOYD, M.B., B.S. (Lond.), D.P.M.
G. S. FIDDLER, M.B., Ch.B. (Edin.), D.P.M.
P. HUGHES GRIFFITHS, B.Sc., M.B., Ch.B. (Wales).

Senior Registrar:

R. ELWY OWEN, M.B., B.S. (Lond.).

Registrar:

DAVID E. JONES, B.A., M.B., B.Ch., B.A.O. (Dublin).

Junior Hospital Medical Officers:

T. J. M. KIRBY, L.R.C.P., L.R.C.S. (Edin.), L.R.F.P.S. (Glasgow).
C. P. O'TOOLE, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M. (R.C.S.I.).

Senior House Officer:

W. LL. PARRY-JONES, M.A. (Cantab.), M.B., B.Chir.

Clinical Assistant:

H. MARI THOMAS, M.B., B.Ch. (Wales).

CONSULTANTS IN OTHER SPECIALITIES.

Pathology:

J. T. ALBAN LLOYD, M.B., Ch.B., D.Path.

General Medicine:

GEOFFREY H. T. LLOYD, M.D. (Lond.).

Electroencephalography:

ROBERT R. HUGHES, M.D. (Liverpool), M.R.C.P.

Diseases of the Chest:

R. W. BIAGI, M.B.E., M.B., Ch.B., M.R.C.P.E.

General Surgery:

D. I. CURRIE, M.B., Ch.B. (Leeds), F.R.C.S. (Eng.).

Neuro-Surgery:

A. SUTCLIFFE KERR, M.C., Ch.B. (Liverpool), F.R.C.S. (Eng.).

Ear, Nose and Throat Surgery:

R. D. AIYAR, F.R.C.S. (Edin.).

Ophthalmology:

ELEANOR M. P. BROCK, M.B., Ch.B. (Liverpool), D.O.M.S.

Anaesthetics:

NANCY I. FAUX, M.B., B.S. (Lond.), D.A.

Radiology:

RODNEY I. GREEN, M.D., D.M.R.D.

Chief Pharmacist:

T. LLOYD JONES, M.P.S.

Dental Surgeon:

CHARLES HUBBARD, L.D.S.

OTHER STAFF.
Matron:

ELEANOR G. GRIFFITH, S.R.N., R.M.N., R.M.P.A.(D.), S.T.D.

Chief Male Nurse:

S. G. BADLAND, S.R.N., R.M.N., R.N.M.D.

Psychologist:

WILFRED PEACE, B.A.

Senior Psychiatric Social Worker:
PAULINE M. HAMMOND, A.A.P.S.W.

Senior Occupational Therapist:
G. R. WILSON, R.M.P.A., M.A.O.T.

Chaplains:
Rev. CYRIL WILLIAMS, Church in Wales.
Rev. J. H. GRIFFITH, M.A., Nonconformist.
Father JOSEPH WEDLAKE, Roman Catholic.

(Pool Park):
Rev. HENRY W. JONES, Church in Wales.
Rev. IVOR PLATT, Nonconformist.

OAKWOOD PARK HOSPITAL.

Secretary-Superintendent:
S. NEWBOULD, A.H.A., D.P.A.

Medical Officer:
H. R. G. DAVIES, M.B., Ch.B., D.P.H.

BROUGHTON HOSPITAL.

Matron-Superintendent:
J. E. LEWIS, R.M.P.A., R.M.N.

Medical Officer:
G. C. BOUGH, M.R.C.S., L.R.C.P.

COED DU HALL.

Matron-Superintendent:
(Mrs.) IRENE TAYLOR, R.M.N.

Medical Officer:
K. A. BUTLER, M.B., B.S.

LLWYN VIEW, DOLGELLAU, AND GARTH ANGHARAD, DOLGELLAU.

Chief Male Nurse-Superintendent, Garth Angharad:

T. A. JONES, S.R.N., R.M.P.A.

Matron-Superintendent, Llwyn View:

M. LLOYD-JONES, S.R.N., S.C.M.

Medical Officer:

H. D. OWEN, M.B., Ch.B.

CHILD GUIDANCE CLINICS.

Central Offices: Bod Difyr, Cefn Road, Old Colwyn.

Consultant Psychiatrist:

E. SIMMONS, M.D. (Bonn), L.R.C.P. & S. (Edin.), (Medical Director).

Senior Registrar in Psychiatry:

J. ALED WILLIAMS, M.B., Ch.B., D.C.H.

Principal Psychologist:

L. SCOBIE, M.A., B.Ed.

Educational Psychologists:

J. B. EDWARDS, M.A., Dip.Ed.Psych. P. J. MACDONALD, B.A.

Psychiatric Social Workers:

G. M. BROWN, B.A. C. LL. JONES, A.A.P.S.W.

Social Workers:

V. FORD THOMPSON. S. MUNDLE, M.A.

Research Staff:

GWYNETH ROBERTS, LL.B., Dip. Soc. Science (Research Fellow).

ELAN GWYN JONES, B.A., Dip.Ed. (Research Assistant).

Thirteenth Annual Report of the North Wales Mental Hospital Management Committee for the Year 1961-62

The Committee have pleasure in presenting their Annual Report for the year 1961-62.

The hospitals entrusted to the Committee's care, providing mental health services, primarily for the North Wales Counties, are as follows:—

North Wales Hospital for Nervous and Mental Disorders, Denbigh	1,373 beds
Pool Park, Ruthin	105 beds
Oakwood Park, Conway	201 beds
Coed Du Hall, Rhydymwyn	80 beds
Garth Angharad, Dolgellau	74 beds
Broughton, near Chester	70 beds
Llwyn View, Dolgellau	68 beds
Gwynfa, Upper Colwyn Bay	20 beds

Out-patient clinics are situated at Bangor, Wrexham, Rhyl and Dolgellau, and at Denbigh by appointment. The Committee are responsible also for the Child Guidance Services with headquarters at Old Colwyn and clinics at Bangor, Blaenau Ffestiniog, Dolgellau, Holyhead, Old Colwyn, Rhyl, Shotton and Wrexham; the recently opened Gwynfa Residential Clinic for emotionally-disturbed children at Colwyn Bay also being operated in conjunction with the Child Guidance Service.

The year has been a momentous one in the National Health Service with the publication by the Government of the Minister of Health's "Hospital Plan for England and Wales" detailing the proposed provision of hospital services throughout the Country in the next ten to fifteen years.

The new concept is of large comprehensive general hospitals to provide treatment for a number of specialities including psychiatry. The plan as it affects mental illness foresees an expansion of the community mental health services and an increase in the amount of home care for which local authorities are responsible, both of which are expected to diminish the number of beds required for hospital care and treatment. The Minister anticipates that it will be possible in the course of time, and subject to progress made by the local authorities, to close many of the very large mental hospitals and considerably reduce the size of those remaining.

In the field of mental subnormality, the idea is to expand the community services to enable more patients to be discharged and avoid or postpone the need for admission to hospital of many cases. Even so, in the final analysis, it appears that some increase in the number of hospital beds will be required to make up for the failure in the past in many areas to provide for this type of patient.

In the fulfilment of the plan in the Committee's area, the North Wales Hospital at Denbigh can be expected to reduce its number of beds below 900 and acute psychiatric units will develop with the new district general hospitals.

With the exception of Broughton Hospital, the small hospitals for the mentally subnormal will, in the course of time, close, and Oakwood Park will be enlarged to accommodate 500 patients.

MANAGEMENT COMMITTEE.

The Committee suffered a great loss during the year through the passing away of one of their members, Councillor the Reverend T. A. Williams, who had, throughout the period of his membership of the Committee, given valuable assistance. Alderman Joseph Brookes, J.P., resigned during the year and the Committee were sorry to lose the services of so experienced and competent a member.

The two vacancies were filled by the appointment of Councillor R. C. G. Jones, of Flintshire, and Councillor Lt.-Col. Lewis Williams, J.P., of Merionethshire, who have both shown a keen interest in the work and proved most helpful.

Regular monthly meetings of the Hospital Management Committee have been held throughout the year at Denbigh, the June meeting being held at Garth Angharad, Dolgellau, in accordance with the Committee's decision to hold one of their meetings at a hospital for the subnormal.

Dr. D. E. Parry-Pritchard, O.B.E., of Caernarvonshire, and Dr. M. T. Islwyn Jones, of Denbighshire, have attended to represent the County Medical Officers of Health as observers and advisers at the Management Committee's monthly meetings and the Committee value highly the help they are able to give. The arrangement goes far towards the forming of a link between the Hospital Management Committee and the local authority health services.

PATIENT STATISTICS.

Full details of patient population are given elsewhere in this report. Numbers on the books at the North Wales Hospital at the beginning and end of the year 1961 are as follows:—

	Male		Female		Total
At 31st December, 1960	685	...	739	...	1424
At 31st December, 1961	692	...	747	...	1439

At the hospitals for the subnormal the numbers on the books are as follows:—

	Oakwood Park		Garth Angharad		Coed Du		Brough- ton		Llwyn View		Total
At 31st December, 1960	202	...	72	...	66	...	67	...	66	...	473
At 31st December, 1961	196	...	74	...	72	...	54	...	68	...	464

FINANCES.

A summary of group expenditure during the year 1961-62 is given elsewhere in this report.

This year's estimates of expenditure, at £800,744, showed an increase above the previous year of £56,669, which can be broadly analysed as follows:—

Awards (Salaries and Wages)	£25,500
Increments	7,000
Development at Gwynfa	6,500
Increased staffs	6,500
Provisions	1,800
Uniforms and clothing	2,300
Replacement of medical and surgical apparatus	4,500
New drugs	2,000
General services	10,000
	<hr/>
	66,100
Less reduction in modernisation programme	9,700
	<hr/>
	£56,400

Apart from Gwynfa and certain price increases on provisions and general services, these figures show the financial effect of various minor improvements which it has been possible to effect this year.

With the institution of "Forward Look" estimates, and an allowance for increased allocations to Hospital Services of 2 per cent. per annum, 1961-62 sees the beginning of a new era in financial control of the Hospital Service.

The costs of maintenance of patients at the Committee's hospitals are as follows:—

In-Patient Cost per Week:

	1959-60	1960-61	Regional Average 1960-61
	£ s. d.	£ s. d.	£ s. d.
Denbigh	7 11 5	8 8 8	8 7 1
Broughton	6 6 2	7 4 8	6 18 10
Coed Du	6 14 4	6 11 10	(excluding
Llwyn View	5 19 11	5 10 10	Llanfrechfa
Garth Angharad	5 1 2	5 9 5	Grange,
Oakwood Park	6 12 0	6 19 8	Cwmbran)

Again, on the whole, the group compares favourably with regional averages, but specific items are being closely investigated as in previous years.

The Endowment Fund received the sum of £3,291 in 1960-61 and expended £3,032, leaving a Fund balance of £1,507.

Interest earned on investment or surplus money has enabled patients' outings, etc., to be increased considerably.

CHARITIES.

The charities have been administered by Trustees representing the Hospital Management Committee and the five North Wales Counties, and helpful grants have been made throughout the year to persons in need. Financial assistance of this kind often eases the mental anxiety of patients and ex-patients and the Trustees are always anxious to make grants whenever it is possible to do so within the terms of the Trust. In these days of full employment and prosperity, however, there is less need for charity than when the original charities were set up and the income from investments continues to exceed disbursements.

SUPPLIES.

The Committee have continued to take advantage of the Ministry Central Supply arrangements, and additional commodities, notably carpets, have been brought into the scheme. It is understood that motor vehicles will be obtainable through War Office contracts in the future.

Joint Contracts covering the requirements of four Hospital Management Committees in North Wales have been operated successfully, resulting in considerable savings, and discussions are taking place with a view to linking up with other areas in the region.

The Supplies Department has had a busy year in furthering the scheme of modernisation and appreciable improvements have been made. A large number of kitchen cupboards and wardrobes have been installed and old and worn-out pianos have been replaced. A comfortable television room has been equipped at Pool Park, and at Llwyn View, where reception is poor owing to the mountains, piped television has been laid on.

Newspapers and periodicals to wards have been increased, and books in Welsh are being added to the hospital libraries.

Seaside holidays have been popular and most beneficial, particularly for those patients who have no relatives or friends to whom they could be sent occasionally for a change from hospital life, and patients have enjoyed holidays at boarding houses in Rhyl. Bookings are now being made further afield at two Llandudno hotels.

WORKS.

The Welsh Hospital Board have been helpful in providing, where possible, improvements of a Capital nature and the necessary funds for improving and upgrading the hospital and its amenities. In consequence, the department has had another extremely busy year. Projects carried out by the Board include the following:—

New suite of offices for the Finance Department and adaptations of existing offices for the Supplies Officer and staff.

A new Occupational Therapy pavilion of pleasing design, situated on high ground overlooking the hospital and the Vale of Clwyd.

A heavy maintenance programme has been completed, including the following:—

Denbigh:

Adaptations to form Central Clinic, E.E.G. Department.

Adaptation of Bryn Golau to form Admission Centre.

Improvements to laundry equipment and installation of coal handling plant.

Renewal of windows in a number of the older wards.

Extensive re-flooring of Nurses' Training School, corridors, toilets and a number of wards.

Provision of stair nosings, treads and risers, with terrazzo dados to all main staircases.

Built-in cupboards in various wards.

Installation of surgeons' basins to meet recommendations of the General Nursing Council.

Broughton:

Complete lay-out of forecourt, including decorative wall (with the help of staff and patients from Oakwood Park).

Re-flooring of corridors and school.

Llwyn View:

Renovation of staff quarters.

Oakwood Park:

Adaptations of out-buildings to form occupational therapy units.

Restoration of conservatory.

Redecoration of first and second floors.

Additional fire escape.

OAKWOOD PARK HOSPITAL.

The Welsh Hospital Board, in consultation with the Hospital Management Committee, have been busy during the year finalising the plans for the enlargement of Oakwood Park Hospital to provide an up-to-date and comprehensive hospital for the subnormal.

Following publication of the new "Hospital Plan" it has been agreed that the accommodation to be provided shall be increased by 50 to 500 and an additional villa has been included in a slightly re-arranged site plan. The plans have now received Ministry approval, and it is hoped that tenders will be placed during the ensuing year.

Following the appointment of Dr. T. S. Davies as Medical Superintendent of Llanfrechfa Grange, the Welsh Hospital Board have appointed Dr. M. J.

Craft as Medical Superintendent of Oakwood Park and Visiting Consultant Psychiatrist to the other hospitals for the subnormal, and he has already done much valuable work and shown great enthusiasm and interest in the tasks ahead.

CHILD GUIDANCE.

The Child Guidance Service has completed an extremely busy year's work, and the new residential centre, "Gwynfa," at Upper Colwyn Bay, has been opened for the investigation and treatment of emotionally-disturbed children. Unfortunately, the opening was delayed and full development somewhat held back by the serious illness of the Consultant Psychiatrist in charge, Dr. Simmons. At the time of the writing of this report it is understood that Dr. Simmons is making good progress towards recovery and the Committee wish him an early return to full health and strength.

STAFF.

During the year the following long-service employees have retired on Superannuation:—

Clement E. Jones	Charge Nurse	34 years
David Roberts	Coal Trimmer	32 years
Evan David Roberts	Nursing Assistant	32 years
Llewelyn Idris Roberts	Nursing Assistant	30 years
John Evan Jones	Charge Nurse	30 years
Sydney Williams	Matron - Superintendent (Llwyn View)	27 years
David John Jones	Nursing Assistant (Pool Park)...	20 years
Edward Owen Williams	Night Porter	19 years

POOL PARK CHAPEL.

The Committee are grateful to the Ruthin and Denbigh Rotary Clubs and others for the work done on an out-building at Pool Park Hospital to adapt it for use as a Chapel. In addition, the building has been completely and most beautifully furnished by voluntary effort and donation.

The Bishop of St. Asaph kindly officiated at a very pleasant Dedication and opening ceremony attended by representatives of all the organisations interested in the project.

LLWYN VIEW HOSPITAL.

Miss Sydney Williams, Matron-Superintendent of Llwyn View Hospital, retired during the year on Superannuation and the Committee have recorded their thanks and appreciation for the long and exceptionally meritorious service rendered.

Miss M. Lloyd-Jones, Matron of Stoney Ridge Hospital, Yorkshire, has been appointed to succeed Miss Williams and has now taken up her duties.

CHAPLAIN—DENBIGH.

The Reverend Hywel Davies, for many years Church in Wales Chaplain at the North Wales Hospital, resigned on leaving Denbigh, and the Reverend Cyril Williams, the newly-appointed Rector of Denbigh, has been appointed to succeed him.

WATER UNDERTAKING.

The Committee have been approached by the Working Party of the proposed West Denbighshire and West Flintshire Water Board with a suggestion that the Committee's water undertaking be transferred to the new Water Board, and the Committee have informed the Working Party and the Welsh Hospital Board that they would have no objection in principle to the merger subject to acceptable terms being arranged.

One exploratory meeting with the Working Party has so far been held.

GENERAL.

The Management Committee wish to express their thanks to members of the House Committees and to the staffs throughout the whole group who have worked so hard to promote the happiness and welfare of the patients.

DAVID TUDOR,

Chairman.

April, 1962.

NORTH WALES HOSPITAL, DENBIGH.

Medical Superintendent's Annual Report, 1961

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit the Medical Superintendent's Report for the North Wales Hospital, Denbigh.

1961 was the first year during which the full provisions of the Mental Health Act were operated throughout, and it has been possible to gain some idea of its effectiveness. By and large, it has proved itself to be a useful and flexible instrument and, to date, no serious flaws have shown themselves.

Looking at Graph II., it will be noted that the admission curve continues its steady upward trend. The discharge curve, which last year hesitated in its rise, is again moving up in parallel.

Graph III. shows that the increase in the admission rate is greater for women than for men. With regard to admissions of patients over 65, it is gratifying to note that, taking the sexes together, there has been no increase. In 1960, Dr. Penrhyn Jones was appointed Consultant Geriatric Physician to the Caernarvonshire and Anglesey area. Last year, Dr. Evan Griffiths and Dr. June Arnold took up similar appointments in the Wrexham and Clwyd and Deeside areas respectively. These appointments are welcomed by us as likely to reduce the necessity for admitting elderly confused patients to this hospital, and we look forward to co-operating closely with the geriatric services which are now being developed in North Wales.

The number of patients admitted informally has been lower than one would have anticipated, the proportion being only 73.2 per cent., a figure which may be thought to compare unfavourably with that of 91.8 per cent. "Voluntary" admissions in 1959 (the last full year of the old Act). However, regard must be had to the fact that, during the year, 393 patients entered the hospital under Three-day Orders, at the expiration of which over 65 per cent. remained as voluntary patients and were formally admitted as such. Nevertheless, it is probably true to say that a higher proportion of cases could have been admitted on an informal basis than was actually the case. The question has been discussed with the Medical Officers of Health of the Five Counties at a joint conference, and it is anticipated that the experience gained this year will lead to a higher proportion of patients being admitted informally next year.

Graph I. illustrates patient population trends. The number of patients remaining in hospital at the end of each year is determined by the number of admissions on the one hand and the sum of the numbers of discharges and deaths on the other. In so far as the return of patients to the community is our object, the curves shown in graph I. are a measure of our success or

failure, although in this connection regard must be had to the greater longevity of our chronic patients in recent years.

Looking at Curve A in graph I., it should be noted that the downward trend which commenced in 1956 has flattened out during the past two years. This new trend is of particular importance having regard to Ministerial policy as set out in the White Paper of January, 1962. This envisages a reduction in the hospital population from its present level at 1,431 to 850 by 1975. Although it is planned to provide psychiatric accommodation at other hospitals, most of the reduction in beds at this hospital must result from the discharge of patients to the community. Therefore, if Ministerial expectations are to be fulfilled, Curve A must somehow be made to resume its downward course. There are two ways in which this can be brought about:—

- (1) More efficient hospital treatment.
- (2) Improved out-patient and community services.

The responsibility for out-patient and community services is shared between the Hospitals and the Local Authorities. The former provides hospital out-patient clinics and domiciliary medical and social services, while the local authorities are expected to provide Hostels and a community mental welfare service. The Minister's plan is a formidable challenge to both the Hospital and the Five Counties. Fortunately, excellent relations exist between us and liaison is close. I would, once again, express my appreciation of the helpfulness of the County Medical Officers of Health and their staffs.

Total Population of the Hospital.

In assessing the following graphs, regard must be had to the fact that the population of the catchment area increased by 11 per cent. during the two intercensal periods, 1931-1961. On the other hand, 43 sub-normal patients have been transferred to more appropriate accommodation recently made available by the Board at Oakwood Park and elsewhere.

Curve A shows that the total population of the hospital rose during 1961 by 7.

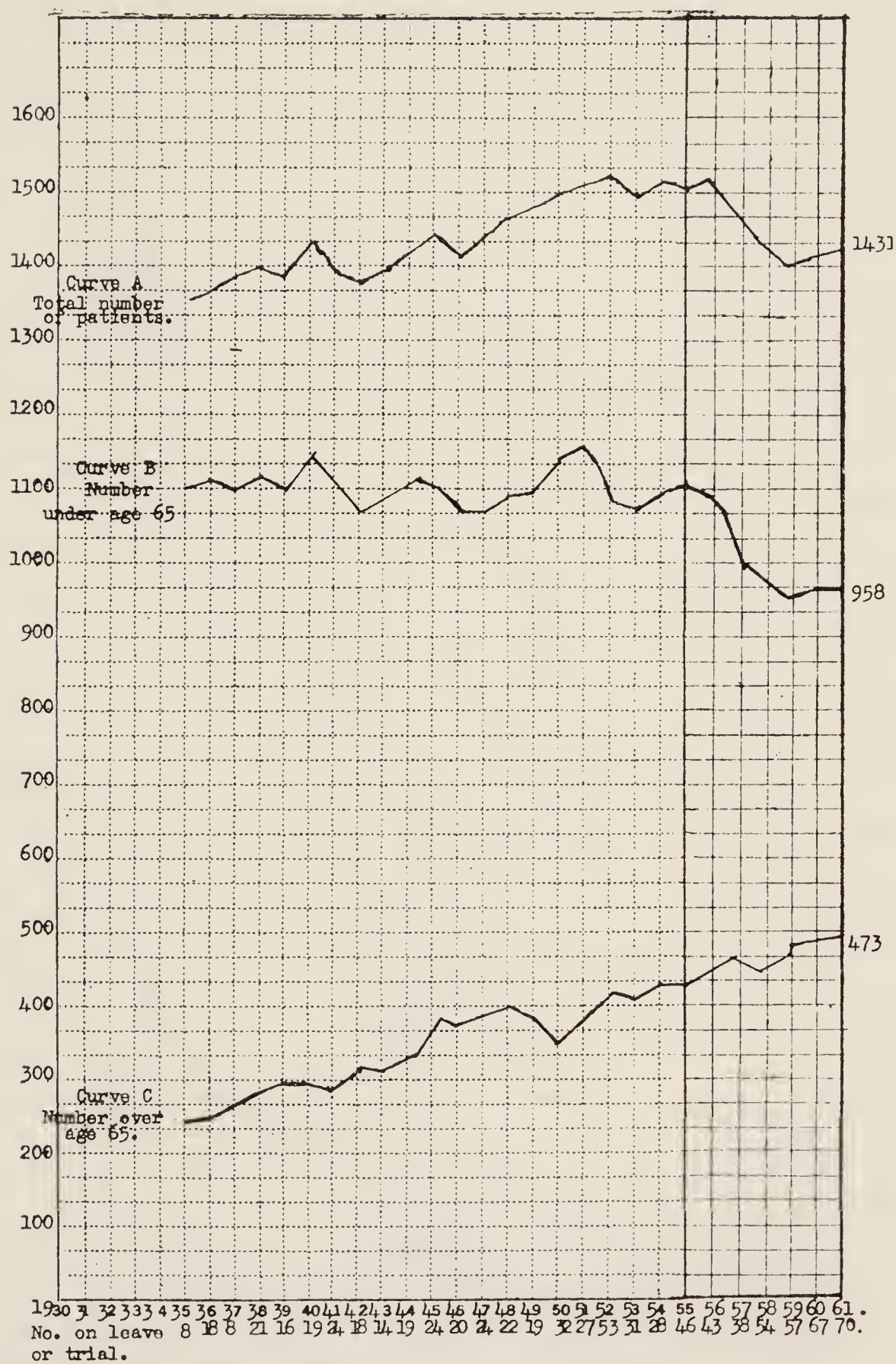
Curve B shows that the number of patients under 65 remained the same.

Curve C shows that the number of patients resident over the age of 65 increased by 7.

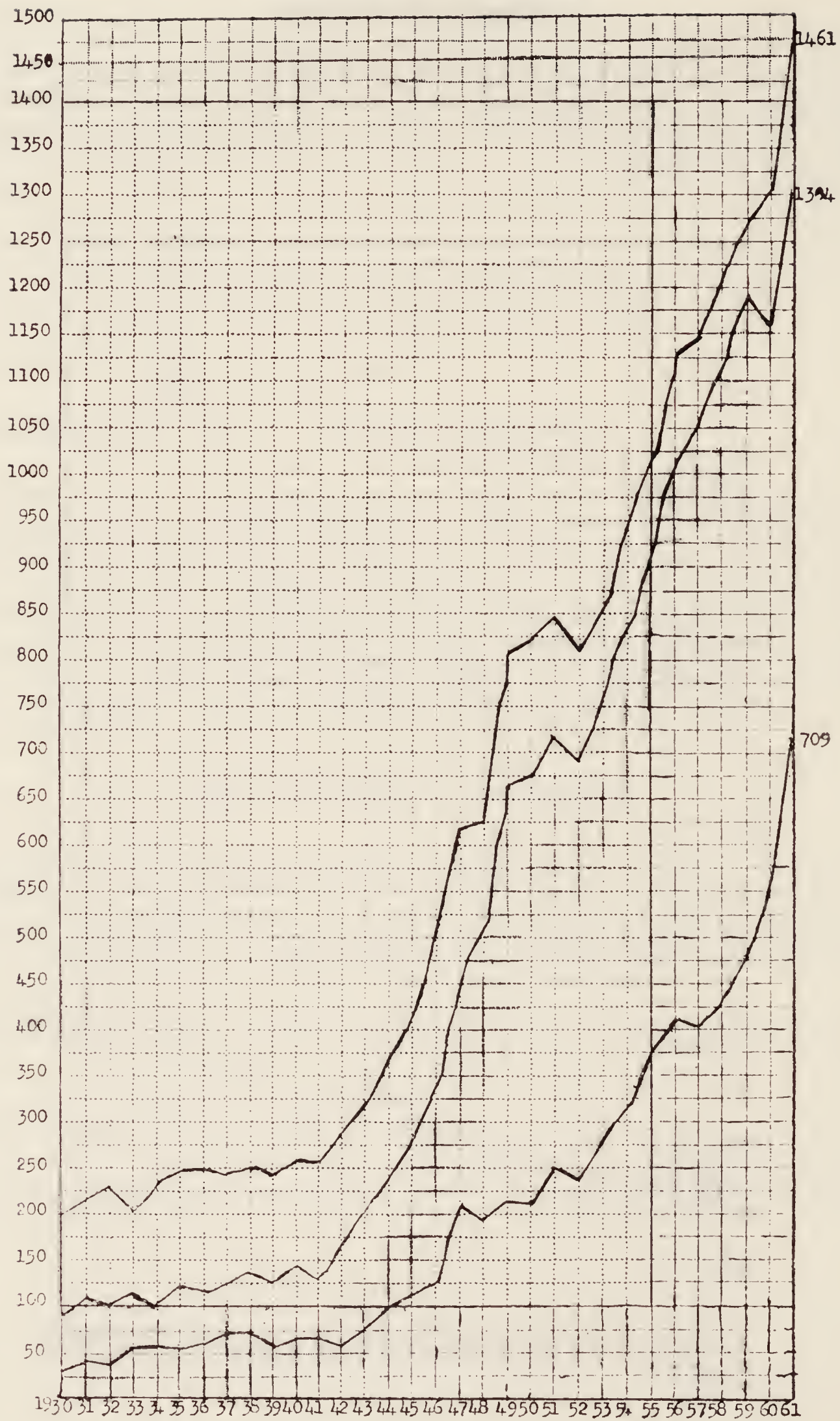
Graph I.

Hospital Population.

The figures on which this Graph is based refer to the number of patients on our books on 31st December each year, but a small number of these patients were out on short leave or trial. The number of such patients is given at the foot of the Graph.

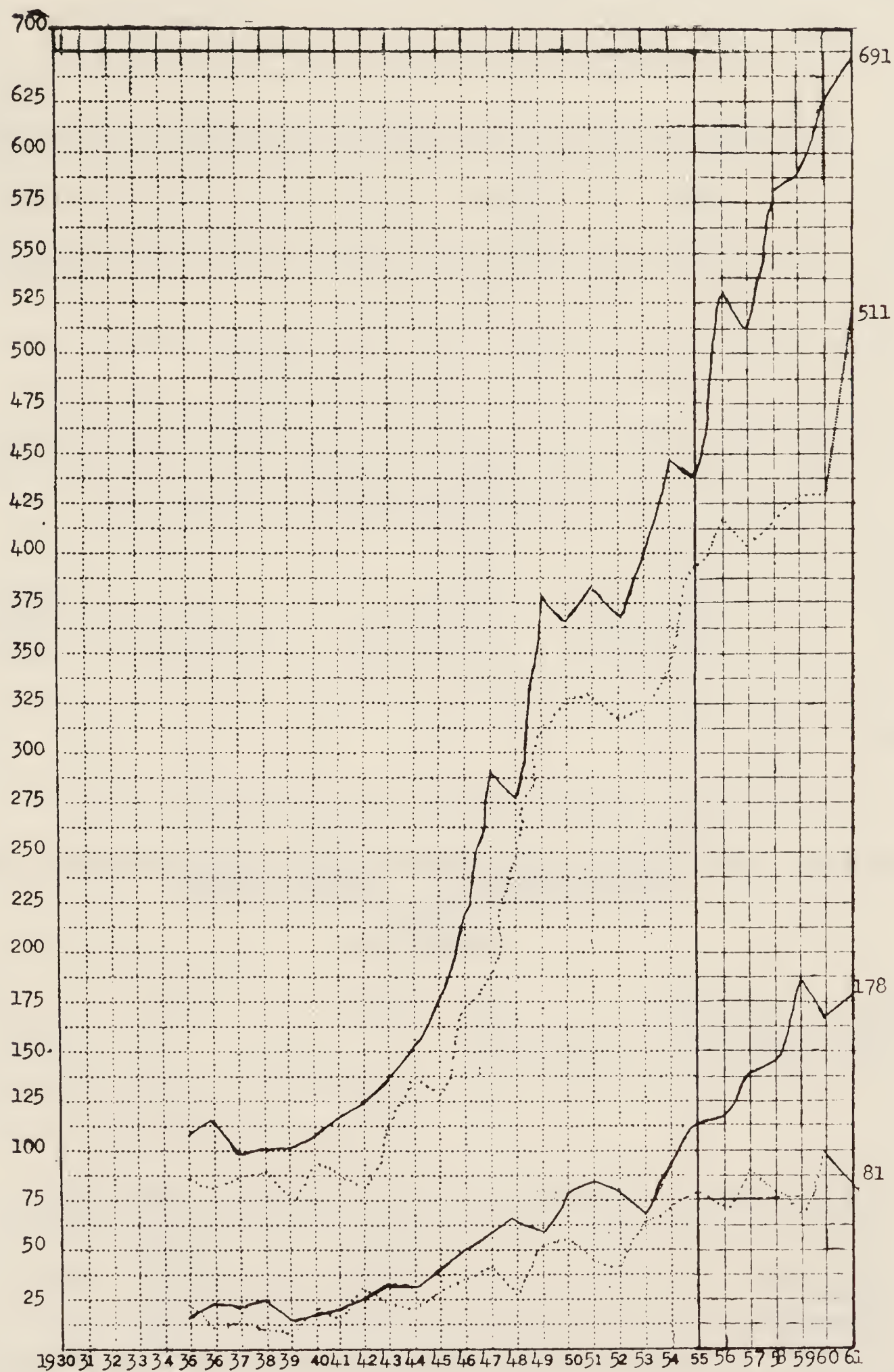


Graph II.
Admissions and Discharges.



Graph III.

Direct admissions according to sex and age group over or under 65 years.



Graph II.—Admissions and Discharges.

The number of direct admissions has again risen and is matched by a proportionate increase in discharges.

In terms of figures, admissions were up by 147 and discharges up by 142. The proportion of informal admissions was 73.2 per cent.

Graph III.—Admissions Classified in Two Main Age Groups.

This gives a picture of admission trends in terms of age and sex.

It will be noted that the admission rate for men over 65 again showed an increase, but that for women dropped by 25.

In the under 65 age group, there was an increase of 66 in the women admitted, and an increase of 84 in males admitted.

The following analysis of the figures for those over 65 admitted in **1960** is interesting, especially with regard to the high proportion discharged during the year. The outlook in the case of mental breakdown in the elderly continues to be much more favourable than used to be expected.

	Number aged over 65 admitted in 1960	Discharged within one year of admission	Died within one year of admission	Remaining at the end of one year
Female... ..	162	94	44	24
Male	101	50	23	28

**GENERAL STATISTICS OF ADMISSIONS, DISCHARGES, DEATHS
AND HOSPITAL POPULATION.**

Admissions.

	Male		Female		Total
Direct admissions	586	...	871	...	1457
Indirect admissions from other men- tal hospitals	1	...	3	...	4
	587	...	874	...	1461

Direct admissions classified according to form of admission:—

	Male		Female		Total
Informal	412	...	657	...	1069
Section 25	4	...	9	...	13
Section 29	163	...	199	...	362
Section 26	8	...	9	...	17
	587	...	874	...	1461

Direct admissions classified according to age groups :—

Age Group	Male	Female	Total
Under 10	—	—	—
10—15	3	4	7
16—19	27	24	51
20—24	39	42	81
25—34	100	126	226
35—44	123	157	280
45—54	102	178	280
55—64	110	162	272
65—74	53	114	167
75 and over	30	67	97

The number of re-admissions during the year was 709.

Discharges.

	Male		Female		Total
Recovered	208	...	375	...	583
Relieved	283	...	389	...	672
Not improved	37	...	12	...	49
	528	...	776	...	1304

Transfers to other mental hospitals: 2 (M. 1, F. 1).
Discharge rate on direct admissions: 89.2%.

Deaths.

	Male		Female		Total
Under 65	13	...	12	...	25
Over 65	42	...	75	...	117
	55	...	87	...	142

The death rate was 10.6 per cent. of the average number resident.

Post-mortem examinations were conducted in 16.9 per cent. of the cases.

H.M. Coroner for West Denbighshire held inquests into the cause of 6 deaths. In no instance was any criticism made by H.M. Coroner touching our care of the cases enquired into.

Hospital Population.

	Male		Female		Total
Number of patients on hospital registers on 31st December, 1960...	685	...	739	...	1424
Number remaining on 31st December, 1961 :—					
Informal	638	...	598	...	1236
Section 29	4	...	6	...	10
Section 25	9	...	5	...	14
Section 26	41	...	130	...	171
	692	...	739	...	1431

Thirty-six patients are classified as Ministry of Pensions “Service” cases.

Appeals by 3 detained patients were heard by Mental Health Review Tribunals. All were unsuccessful.

ACCOMMODATION OF THE HOSPITAL.

	Male	Sleeping	Female
Statutory Accommodation	585	...	559
Number of patients on the register on night 31/12/61 ...	692	...	739
Deficiency of Accommodation	107	...	180
Percentage Overcrowding	18%	...	32%

Note. The statutory accommodation is the accommodation of the hospital calculated in accordance with rules laid down by the Ministry of Health.

THE GENERAL HEALTH OF THE HOSPITAL.

The health of the patients generally has been satisfactory.

Pulmonary Tuberculosis: There are at present in the hospital 4 male but no female active cases. During the year, one patient died from pulmonary disease and one from disease of the Iliac bone.

B.C.G. Vaccination: All nurses are Mantoux tested on joining and, as a result, 5 required B.C.G. vaccination during 1961.

NURSING STAFF.

Matron and Chief Male Nurse report as follows:—

“Although this year has seen a reduction of weekly working hours for nurses and difficulties arising therefrom, it has, nevertheless, been found possible to continue the policy of providing the highest possible standard of nursing service for the patients.

This year has seen the formation of the Nurse Education Committee under the Chairmanship of Mrs. Wyn Jones, to whom we are all indebted for her keen interest and support in all matters relating to nurse education in the hospital. The Committee has as its main aims the planning of the educational policy of the school of nursing and of maintaining the highest possible standard of nursing service. Several measures, important to nurse education, have been discussed and implemented as a direct result of this Committee's work, and it is sincerely hoped that it will continue to advise on and direct the nurse training programme of this hospital. One pleasing result of its activities has been the introduction of hospital scarves and ties for trainees and qualified staff.

Examination results have again been very satisfactory. 86 per cent. has been achieved in the Final examinations, and 90 per cent. successes in the Intermediate examinations.

Of considerable importance has been the "Day Release" of our cadet nurses to enable them to attend the Colwyn Bay Technical Institute for one complete day per week. Here they are given instruction in the basic sciences which will better equip them to undertake nurse training when they attain the age of 18 years. It is felt that the "Day Release" of these young nurses will ensure the continuance of their theoretical studies whilst awaiting the minimum age of being eligible to assume full student nurse status.

The Management Committee's sanction in principle has been obtained to second female nurses to undertake General Training. Two female psychiatric trained nurses have now left to undertake this additional training, and will be returning to the hospital on the completion of their two year course at Clatterbridge Hospital.

Of great benefit to the nursing school, has been the converting of an adjacent building to an additional classroom. This temporary measure, that is until the new training school is provided, has eased the problem of overcrowding in the classroom, and has helped greatly in the arrangement of classroom teaching of nurses.

During the year, two advanced study courses, each of one week's duration, have been held for senior post-graduate staff. Thanks are expressed to all the lecturers who accepted the invitation to address the staff and who ensured the success of these refresher courses.

The recruitment of student nurses continues to give concern and is not as high as we would wish, but by maintaining our policy of careful selection, it is pleasing to note that the wastage remains well below national average.

The approval of the General Nursing Council has now been obtained for the hospital to introduce here a shortened course of training which will enable General Trained nurses to qualify as psychiatric nurses in a period of eighteen months.

The Nurses' Annual Prizegiving was held in October. The guest speaker was Miss Ceris Jones, who, until her recent retirement, was Matron of the London Hospital. This event has continued to be popular and successful.

Table I.

	31/12/57		31/12/58		31/12/59		31/12/60		31/12/61	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Qualified Mental Nurses...	65	19	58	23	62	26	65	26	73	25
Qualified, also S.R.N.	10	4	11	3	10	5	11	4	11	4
Student Nurses	24	17	26	24	37	19	41	22	36	27
Nursing Assistants...	34	33	33	40	36	46	35	42	28	40
Part-time Nurses (in terms of whole-time) :										
Qualified	—	7	1	6	2	4	2	7	2	7
Assistant...	—	57	—	48	—	48	—	48	—	43
	133	137	129	144	147	148	154	149	150	146

Table II.—Strength of Trained Female Staff.

	Whole-time	Part-time
December, 1946	23	—
" 1948	24	—
" 1950	16	3
" 1952	16	6
" 1954	21	8
" 1956	24	9
" 1958	23	10
" 1959	31	7
" 1960	30	7
" 1961	29	11

Table III.—Annual Intake of Student Nurses.

	Male	Female
1947	5	40
1948	5	32
1949	5	32
1950	2	14
1951	2	17
1952	5	16
1953	10	17
1954	8	6
1955	6	6
1956	8	14
1957	15	6
1958	15	18
1959	20	9
1960	14	9
1961	12	14

TREATMENT OF MENTAL ILLNESS.

The treatment of mental illness divides itself into the following categories:—

- 1—Measures directed to improving the patient's general health.
- 2—Measures directed to re-educating the patient. These include advice, psychotherapy and, upon discharge, the follow-up care.
- 3—Occupational and recreational therapy and social rehabilitation. In all mental illnesses, there is a tendency for the patient to withdraw into himself, and it is necessary to counteract this by every means in our power. It is not sufficient that the patient be given the right medical treatment. His faculties, as they recover, must be given carefully graded exercise and he must be encouraged to take part again in the daily round of social activities which make up life. This means that his day must be filled with work and recreation appropriate to his mental state, a task which calls for considerable resources.

In 1959, a new occupational and recreational centre was opened at Gwynfryn. Here, during the day, patients of both sexes occupy themselves, while in the evening, various social functions take place. A Patients' Committee is encouraged to take as much responsibility as possible in organising all affairs of interest and importance to them.

In 1961, a second occupational and recreational centre was built on a site adjacent to Bryn Golau. This provides recreational and occupational facilities for recent patients under treatment at Brynhyfryd and Bryn Golau Villas, and is run on similar lines to the Gwynfryn centre. Brynhyfryd accommodates 50 ladies, and Bryn Golau 50 men, so the sexes are evenly matched.

The special unit for the rehabilitation of long-stay male patients has been transferred from Bryn Golau to Wards 2 and 3 in the main building. This does not mean that less importance is attached to this work than formerly, or that Bryn Golau was not suitable. Unfortunately, we have only one male villa and it seemed that the needs of our acute patients could only be met adequately at Bryn Golau, whilst Male Wards 2 and 3 have been adapted fairly well to the needs of rehabilitation.

- 4—Special methods of treatment of which the following are the most important in use at this hospital:—

- (i) **Electro Convulsive Therapy:** This is applied by passing an electric current through the brain.
- (ii) **Prefrontal Leucotomy:** This is a surgical procedure whereby nerve fibres passing from the frontal lobes to other parts of the brain are divided.

- (iii) **Tranquilliser Therapy:** The so-called 'Tranquilliser' drugs have received considerable publicity. Although unpredictable in their likely results in individual cases, they greatly benefit many patients and sometimes produce dramatic results. They are especially valuable in schizophrenic and disturbed senile states. While we have tried out most of the tranquillising drugs available, up to now, chlorpromazine and trifluoperazine are the most useful for our particular patients.
- (iv) **Antidepressant Drugs:** During the past three years, a new class of drug influencing depressive states has come into use. They include imipramine and the mono-amine oxidase inhibitors. While it is too soon to make any true assessment of their usefulness, results so far are encouraging.

The following Table shows the number treated by various physical methods during 1961:—

Treatment	Male	Female	Total
Electro Convulsive Therapy	—	6	6
Modified E.C.T.	173	444	617
Deep Insulin	—	1	1
Modified Insulin	4	20	24
Abreaction Techniques	3	6	9
Leucotomy	3	1	4
Narco-Analysis	20	5	25

Leucotomy Cases.

The following is the analysis of the results in all cases operated upon between April, 1942, and December, 1961.

	Male	Female	Total
Number of cases	161	138	299*
Discharged "Recovered" or "Relieved"	105	92	197
Improved in hospital	47	37	84
Unchanged	32	22	54
Died as a result of operation	5	7	12
Discharged, but since relapsed	31	21	52

*Includes 8 cases who have been operated on more than once.

Commentary: As leucotomy is only performed on cases which have not responded to other forms of treatment and in which the outlook without operation is regarded as hopeless, the result shown in the above tables is regarded as satisfactory.

Surgical Operations.

The operation of leucotomy is performed by Mr. A. Sutcliffe Kerr in the hospital operating theatre, and 4 operations were carried out in 1961.

Most major general surgical operations are performed at neighbouring general hospitals, straightforward cases returning to this hospital on the same day.

Consultants' Visits in Specialities other than Psychiatry.

Speciality	Consultant	Frequency of attendance	Number of patients seen
General Medicine	Dr. G. H. T. Lloyd	Weekly	217
Tuberculosis	Dr. R. W. Biagi	Fortnightly	34
General Surgery... ..	Mr. D. I. Currie	Monthly	133
Ophthalmology	Mrs. E. M. Brock	Monthly	120
Ear, Nose and Throat Surgery	Miss Catrin Williams ...	(Seen at St. Asaph)	6
Neurosurgery	Mr. A. Sutcliffe Kerr ...	As required	8

Dental Department.

Mr. Charles Hubbard, the visiting dental surgeon, gives two sessions each week. All patients requiring treatment are seen as soon as possible after admission and their teeth put in order.

During 1961, 1,324 patients were examined. Extractions were carried out in 382 cases; 88 patients had teeth filled; 52 were provided with dentures and 54 had their dentures repaired.

SPECIAL METHODS OF INVESTIGATION.

Pathological Laboratory.

Since the retirement of Dr. A. Ceinwen Evans as Consultant Pathologist in October, 1958, the pathology work required by the hospital has been carried out at Clwyd and Deeside H.M.C.'s laboratories at the Royal Alexandra Hospital, Rhyl, and H. M. Stanley Hospital, St. Asaph, except for post-mortem examinations, which continue to be conducted here. The arrangement works well and I am grateful to Dr. T. Alban Lloyd and Dr. G. Hefin Roberts for their helpfulness.

X-ray Department.

During 1961, the following examinations were made:—

	Patients		Staff		Total
	Male	Female	Male	Female	
Chest	1138	827	269	338	2572
Skeletal	273	767	42	21	1103
Total	1411	1594	311	359	3675

All Radiographs are seen and reported on by Dr. Rodney I. Green, Consultant Radiologist to the hospital.

Department of Psychology.

Mr. W. M. Peace reports as follows: "The main function of the psychologist is to provide assessments of intelligence, personality and psychiatric disturbance with the aid of standard tests. All patients referred in the past year have been tested individually and the work falls under three headings. The figures in brackets refer to 1960:—

"In-patients: A total of 249 (250) in-patients were seen, and of these 163 (159) were referred for intelligence testing alone, and 86 (91) for personality and/or diagnostic testing in addition.

"A full-scale intelligence test or slight abbreviation of this is used with many of the male patients soon after admission. These results may prove useful for re-test or diagnostic purposes at a later date, in addition to providing information for more immediate use on the case.

"Out-patients: Nineteen (14) patients were referred, 16 for intelligence testing and 3 for diagnostic testing.

"Sub-normal cases: Thirty-nine (68) patients were seen, in most cases assessment of intelligence alone. Many of these patients were under consideration for transfer to other hospitals in the area and were new admissions.

I would like to express my thanks to Mr. L. Scobbie, Principal Psychologist in the Child Guidance Service, for his advice on particular cases and for the opportunity for more general discussion of clinical work."

Department of Electro-Encephalography.

The electro-encephalograph is an instrument for recording the electrical waves generated in the brain and is of assistance in the diagnosis of epilepsy, certain cases of tumour and other disorders of the brain. We have been

advised that the Ediswan electro-encephalograph and wave analyser installed in 1956 are obsolescent and it is hoped to replace them in the near future by Offner transistorised instruments. The old apparatus will not be discarded and will be retained for sleep recordings and general reserve.

The department deals with not only our own cases but also with the cases referred by Physicians and Paediatricians in the general hospitals of the area.

I would again express my appreciation of the kindness of Dr. Robert R. Hughes, of Liverpool, who visits us periodically to report on the more obscure records and to advise us generally on the work of the department, and I am grateful also to the Liverpool Regional Hospital Board who have placed at our disposal the services of their Chief E.E.G. Technician, Mr. Banks, who visits us every fortnight.

During 1961, the Department dealt with the following cases:—

	First Attendance	Repeat	Total
In-patients at North Wales Hospital	194	145	339
From Psychiatric O.P. Clinic	53	35	88
From N.W. Child Guidance Clinics	—	—	—
From Paediatric Consultants	217	77	294
From Consultant Physicians	125	69	194
Total	589	326	915

SOCIAL LIFE OF THE PATIENTS.

Religious Services.

Services at the hospital chapel are conducted alternately in Welsh and English by the Church of England and Nonconformist Chaplains. They are held at 8.45 a.m. and 2.45 p.m. on Sundays, and at 9 a.m. on Wednesdays and Fridays. A Prayer Meeting is also held on Sunday evenings in which the patients take part.

The Roman Catholic Chaplain holds a service every Thursday evening and attends whenever needed to minister to the seriously ill.

Employment of Patients.

Occupational Therapy: Accommodation has been improved considerably during the year. A new pavilion for sixty patients has been opened at Bryn Golau. In addition, the accommodation vacated by the Accounts' Section of the Finance Department, the Pathology Laboratories and a Verandah on the male side, have been put at the disposal of the department.

The centre at the main building contains a printing department and a workshop equipped with metal and wood turning lathes and other modern machinery. Work done has included the following commercial propositions:—

- Assembly of bedside lockers from prefabricated parts.
- Making of pot scourers in steel and plastic.
- Reconditioning of electric petrol pumps for cars.
- Dismantling of electric meters.
- Trimming of rubber container caps.
- Repairs of chairs and tables (for two firms).

Patients not employed in the Occupational Therapy Department are encouraged to take part in the ordinary necessary work of the hospital. This not only helps their mental condition but gives them the sense of being useful members of the community.

Work in the grounds of the hospital is ideally suited to the patients and offers a variety of tasks. Work is now proceeding on the levelling of a new football pitch adjoining the cricket ground, which was made three years ago by the patients.

The Canteen.

The Hospital Canteen continues to provide a very satisfactory service, and patients who have not the privilege of town parole are there able to purchase such items as fruit, sweets, tobacco, etc.

Goods are paid for either in the normal currency of the realm or in the forms of tokens of varying value.

Patients who have no income from other sources are allowed up to 10/- per week pocket money, the actual amount varying according to their capacity to appreciate spending it. Patients are also remunerated for useful work in the hospital and in this way may earn up to an additional 10/- per week. Whilst free issues of tobacco and sweets have been reduced to a minimum, they are still available to patients unable to visit the canteen for physical or mental reasons. The canteen at Pool Park is also very much appreciated by the patients there.

Patients' Library.

The Hospital Library Service is operated by the Red Cross Society. Their librarians visit certain wards to take books directly to such patients as are unable to use the central library. The latter is open on two evenings and one afternoon per week for the exchange of books.

Hairdressing Saloon.

This year, the staff of the ladies' hairdressing saloon has been put up from 2 to 3 to cope with increasing demands for perms and sets, and an extra room has been equipped and brought into service.

So far, we have been unable to provide a hairdressing saloon for the men, but a full-time barber attends in the wards. The majority of patients now shave themselves, either with electric or safety razors.

Recreation.

All wards are provided with television and wireless.

Football, cricket, bowls and netball are played, and fixtures arranged with neighbouring hospitals and other organizations. Physical training classes are held regularly and, during the summer, we have the use of a nearby swimming pool.

Each Wednesday evening, there is a patients' dance, and on Monday a cinema show. During the winter months, whist drives and billiards tournaments are held. Throughout the year social evenings flourish and, as far as possible, these are organized by Patient Committees. At Gwynfryn and Bryn Golau, these Committees partly finance their own ward entertainments by making and selling teas to visitors. Fourteen concerts were presented during the year, including three by the Council for Music in Hospitals. Two Boxing Exhibitions were sponsored by the North Wales branch of the Amateur Boxing Association.

In summer, patients go on regular outings to the seaside, to the mountains and to such local events as sheep dog trials and flower shows.

We are again indebted to the W.V.S., who, in addition to the weekly social for younger patients of the main hospital, run a Darby and Joan Club for the more elderly. Both ventures are a great success.

The hospital branch of Toc H, founded in 1960 under the aegis of Denbigh Toc H, continues to flourish and meets weekly. In addition to the more manifest advantages, membership of this organization proves of great value when a patient leaves hospital through the introduction which it gives him to members of Toc H in any town in which he may become resident.

At Pool Park, Clocaenog, Clawddnewydd and Cyffylliog Women's Institutes hold regular whist drives at the hospital and, also, at their respective village halls, to which the patients are invited. The Ruthin Rotary Club also visits regularly and, from time to time, puts on social evenings. Our indebtedness to these bodies is gratefully acknowledged, as Pool Park, being further off the beaten track than Denbigh, its patients have fewer opportunities for making outside contacts.

Holidays.

During the year, 45 men and 60 women each had a week's holiday at Rhyl, staying at a boarding house. Also 160 male patients spent a week at the Cheshire County Council holiday camp at Pensarn, which had been lent

to the Committee for a period. Both these ventures proved a great success and our patients, most of whom had spent many years at Denbigh, greatly enjoyed the change.

For patients who would not normally have been considered fit for the holiday arrangements described above, a very worthwhile innovation was that of exchange visits of a fortnight's duration with two other hospitals. A party of 35 male patients went to De La Pole Hospital, Hull, and a mixed party of 36 went to the Central Hospital, Warwick. Both hospitals gave our patients and accompanying staff a very warm welcome and entertained them most liberally. We, on our part, endeavoured to repay the hospitality when it came to our turn to be host.

OUT-PATIENT SERVICES.

(1) Out-Patient Clinics.

These clinics, held at general hospitals, provide facilities for the diagnosis and treatment of patients who do not require admission to a mental hospital.

Clinics are held at the following centres:—

Bangor	Caernarvonshire & Anglesey Hospital	Every Tuesday afternoon. Every Wednesday morning and afternoon.
Dolgellau	General Hospital	Fourth Tuesday in each month.
Rhyl	Royal Alexandra Hospital	Every Tuesday morning. Every Thursday afternoon.
Wrexham	Maelor General Hospital	Every Tuesday afternoon. Every Friday morning and afternoon.
Mold	Cottage Hospital	Every Wednesday afternoon.
Denbigh	North Wales Hospital	By appointment.

Table of Attendances, 1961.

Clinic	First Attendance			All Other Attendances		
	Male	Female	Total	Male	Female	Total
Bangor	220	273	493	476	551	1027
Dolgellau	12	22	34	24	41	65
Rhyl	137	201	338	347	559	906
Wrexham	166	221	387	537	868	1405
Mold	35	51	86	99	209	308
Denbigh	16	27	43	11	81	92
Total	586	795	1381	1494	2309	3803

The following are the figures of total attendances at all adult clinics during the past 16 years:—

1946	576	1954	3630
1947	830	1955	3990
1948	1167	1956	4150
1949	1224	1957	4263
1950	1778	1958	4332
1951	2295	1959	4894
1952	2878	1960	5233
1953	2815	1961	5595

(2) Domiciliary Visits.

These are visits made at the request of general practitioners for a consultation in the patient's own home. The usual reason for the request is that the patient is too ill to attend a clinic. The number of such visits made in 1961 was:—

Male: 99 ... Female: 226 ... Total: 325

(3) Visits to Patients in Hospitals in other Management Committee Groups.

Specialists on the staff at Denbigh may be required to attend at any hospital in the following Groups:—

Group 12 (Caernarvon and Anglesey).
Group 13 (Clwyd and Deeside).
Group 14 (Wrexham).

The number of patients visited during the year in hospitals in these Groups amounted to:—

Male: 27 ... Female: 59 ... Total: 86

(4) Examination of cases referred by the Courts under the provision of the Criminal Justice Act, 1948.

Male: 5 ... Female: Nil ... Total: 5

Psychiatric Social Work Department.

Miss P. M. Hammond reports as follows: "The two major functions of this department have always been the obtaining of necessary information about the background of the patients' breakdown and the affording of such guidance and assistance to patients or their relatives as seems to be appropriate. The Department has always tried to maintain an active liaison between the hospital, local authorities and other social services, and a quite considerable amount of time is spent in discussing and working out with our colleagues in these services ways in which patients and relatives may benefit from a closely integrated approach.

“ The department is used increasingly for teaching and this year we have taken two students from a new course in Applied Social Studies run by the University College, Cardiff. Our total student programme included:—

P.S.W. Students:—

Manchester University	3
Liverpool University	4

Applied Social Science Students:—

Cardiff University College	2
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Child Care Students:—

Liverpool University	2
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Social Science Students:—

Swansea University College	4
London School of Economics	3

“ **Staff:** At the beginning of the year we had 5 P.S.W.'s. Mr. Stott left us at the end of January and, in February, Miss Race joined us as a Social Worker. In February, Mrs. Carys Jones left to join our Child Guidance staff. On April 1st, the establishment was raised to 6, including a Senior P.S.W. and a Teacher/Supervisor.

“ On September 30th, Mrs. Iolo Jones resigned her senior status, but continues as a full-time P.S.W., working primarily in Anglesey and Caernarvonshire. Mr. Alan Davies joined the staff on October 1st. At present, we have a vacancy for a Teacher/Supervisor.

“ In July, Miss Mair Jones was appointed as a junior clerk to help Miss L. Roberts, the Department Secretary.

“ **Note:** A Psychiatric Social Worker is one who holds both a Social Science qualification and a certificate in Psychiatric Social Work, i.e., a fully qualified member of the staff. A social worker has the social science qualifications only. Usually, Social Workers go on to take a course in psychiatric social work at an appropriate University after a preliminary training in the field.

“ **Rehabilitation:** Mrs. Iolo Jones resigned from the Wrexham Disablement Advisory Committee in September, and her place taken by Miss Margaret Brown. Miss Hammond continues to serve on the Blaenau Ffestiniog Committee.

“ **Clubs:** The establishment of social clubs under the local authority at Wrexham and Rhyl has proved a great help in the sphere of after-care. It has, unfortunately, not been possible for members of the department to attend the Wrexham Club, but two or three workers have been able to share in the activities of the Fron Fraith Social Club at Rhyl, with Miss Race attending regularly.

“ The following Table gives details of work done with adults during 1961. The services rendered are indicated as follows:—

HV—Home Visit.

OV—Other Visit.

I—Interview in hospital or out-patient clinic.

“ These services are classified under two headings, according to whether they are the responsibility of the Board (Class I.) or the Local Health Authority (Class II.). In respect of Class II. Service, the Management Committee receives payment from the Local Authority concerned.

“ **Class I.:** This class includes patients who are in hospital and attending an out-patient clinic for treatment or, in the case of detained patients, are at home on trial-leave.

“ **Class II.:** This class, broadly speaking, is in receipt of “ after-care.” It includes all patients who have been discharged from hospital and out-patients who are no longer attending a clinic for treatment. It also includes a small number of “ pre-care ” cases. These are patients who are referred from outside social agencies direct to the department.”

Class I.

County	In-patients					Out-patients					Total
	HV.		OV.		I.	HV.		OV.		I.	
Anglesey	20	...	3	...	7	31	...	5	...	—	66
Caernarvon	100	...	17	...	45	173	...	20	...	22	377
Denbigh	96	...	24	...	61	206	...	30	...	41	458
Flint	78	...	31	...	45	235	...	23	...	108	520
Merioneth	24	...	6	...	9	21	...	1	...	1	62
Other Counties	—	...	—	...	—	2	...	—	...	1	3
Total ...											1486

Class II.

County	In-patients			Out-patients			Pre-care			Total						
	HV.	OV.	I.	HV.	OV.	I.	HV.	OV.	I.							
Anglesey	30	...	2	...	1	34	...	2	...	6	22	...	2	...	—	99
Caernarvon... ..	222	...	25	...	9	81	...	6	...	4	44	...	1	...	3	395
Denbigh... ..	121	...	22	...	15	140	...	6	...	4	25	...	4	...	8	345
Flint... ..	113	...	9	...	15	118	...	7	...	17	12	...	—	...	1	292
Merioneth	53	...	5	...	3	17	...	—	...	4	5	...	3	...	1	91
Other Counties ...	—	...	—	...	—	—	...	—	...	—	—	...	—	...	—	—
Total ...																1222

Grand Total Class I. and Class II.: 2708.

The Suicide Act, 1961.

Under the provision of the Suicide Act, 1961, attempted suicide has ceased to be a criminal offence. This implies that attempted suicide is now regarded as a medical or social problem, and it is no longer possible to rely on the law as a means of seeing that any necessary help is forthcoming. Most cases of attempted suicide come into general hospitals for urgent treatment, after which it is recommended by the Ministry that they should be referred to the psychiatrist for investigation before discharge, or, if necessary, be transferred to the neighbouring psychiatric hospital.

Arrangements to implement this recommendation have been made, and are working satisfactorily.

SENIOR STAFF CHANGES.

Rev. Hywel Davies, Chaplain—Church in Wales—resigned on 31st May, and was succeeded by the Rev. Cyril Williams.

Dr. D. N. Parfitt commenced duty as Consultant Psychiatrist on the 16th February, and Dr. G. S. Fiddler terminated his appointment as Senior Hospital Medical Officer on the 5th August.

Mrs. K. Iolo Jones relinquished her appointment as Senior Psychiatric Social Worker on the 30th September, and was succeeded by Miss P. M. Hammond.

CONCLUSION.

I would like to take this opportunity of paying tribute to the work of my nursing, lay and medical colleagues, whose co-operation and support I have highly valued.

To you, Mr. Chairman, Ladies and Gentlemen, I express my great appreciation of the courtesy and consideration which you invariably show me.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

J. H. O. ROBERTS,

Medical Superintendent.

**NORTH WALES
CHILD GUIDANCE CLINICS**

REPORT

FOR THE YEAR

1961

NORTH WALES CHILD GUIDANCE CLINICS

REPORT FOR THE YEAR 1961.

Mr. Chairman, Ladies and Gentlemen,

It gives me great pleasure to present the report of the North Wales Child Guidance Clinics for 1961.

INTRODUCTION.

The year 1961 saw an improvement in our staffing position. Unfortunately, illness of the medical staff produced special problems during the latter months. These were largely overcome through the readiness of my co-workers to take over duties not normally theirs, and services were maintained at a high level of efficiency. The overall "output" for the year, in consequence, compared favourably with that of earlier years.

Clinics, four weekly and three fortnightly, continued to be held in the counties of Anglesey, Caernarvonshire, Denbighshire, Flintshire and Merionethshire. In addition, we became responsible for "Gwynfa," our new residential clinic in Colwyn Bay.

A summary of statistical data and details regarding staffing and clinics will be found in the three tables which follow. Other matters of special interest and detailed statistics are given later in the report.

Statistical Data: Summary covering a 10 year period.

Table 1.

Year	1952	1957	1959	1960	1961
New referrals	199	315	374	379	384
Number of individual children with whom one or more members of clinic teams dealt	256	541	545	511	520
Psychiatrists/Child Therapists—Attendances at clinics:					
Children	611	1236	1493	971	841
Parents	—	—	506	585	259
Psychologists:					
School and other visits	192	210	303	217	227
Interviews—					
Children	41	1035	950	684	804
Parents	—	—	101	314	206
Psychiatric Social Workers:					
Home and other visits	495	504	193	33	247
Interviews at clinics	306	1604	1196	265	650
Number of individual interviews by all Workers	1695	4590	4742	3069	3234

Particulars of Clinics.
Table 2.

Town	Address and Telephone	Day
Bangor	Sackville Road, Bangor. Telephone: Bangor 2735.	Tuesday.
Bl. Ffestiniog ...	"Isallt," Blaenau Ffestiniog. Telephone: Blaenau Ffestiniog 93.	2nd, 4th and 5th Mondays in month.
Colwyn	Bod Difyr, Cefn Road, Old Colwyn. Telephone: Colwyn Bay 55016.	Wednesday, Friday.
Holyhead	St. David's Priory, Holyhead. Telephone: Holyhead 2255.	Every other Thursday.
Rhyl	Fron Fraith, Boughton Avenue, Rhyl. Telephone: Rhyl 1208.	Monday.
Shotton	Ash Grove, off Queensferry Road, Shotton. Telephone: Connah's Quay 383.	Every other Friday.
Wrexham	Gatefield House, 32 Kings Mills Road, Wrexham. Telephone: Wrexham 4048.	Thursday.

Note: Clinics are normally held from 10 a.m. to 1 p.m. and from 2 p.m. to 5 p.m. Most interviews occupy three-quarters of an hour and we have to work to a strict appointment system, adhering to a time-table which is prepared some weeks ahead as a rule.

Staff, as expected about mid-1962.
Table 3.

Names	Posts
(A) Clinical:	
Dr. E. Simmons... ..	Medical Director and Consultant Psychiatrist.
Dr. J. A. Williams	Senior Registrar in Psychiatry.
Dr. J. Pryce	Registrar in Psychiatry (due to join 2/4/62).
Mr. L. Scobbie	Principal Psychologist.
Mr. J. B. Edwards	Educational Psychologist (joined 1/11/61).
Mr. P. J. Macdonald	Educational Psychologist (Clinical Psychologist to 31/8/61).
Mr. J. Sants	Part-time Psychologist (joined 2/2/61).
Miss G. M. Brown... ..	Psychiatric Social Worker.
Mrs. C. L. Jones	Psychiatric Social Worker (maximum part-time).
Mrs. V. Ford-Thomson	Social Worker.
Mrs. S. Mundle... ..	Part-time Social Worker.
(B) Research:	
Miss G. Roberts	Research Fellow.
Miss E. Jones	Research Assistant.
(C) Secretarial:	
Miss D. Harrison	Secretary.
Miss J. E. Bowyer Sidwell...	Shorthand-Typist/Clerk.
Miss E. Davies	Shorthand-Typist/Clerk.

Note: Most members of the clinical staff carry responsibilities in respect of the work of "Gwynfa," but no additional workers have been appointed.

Mrs. J. Sants, part-time psychologist at the Bangor Clinic, is expected to transfer to the staff of "Gwynfa" as part-time child therapist.

The senior nursing officer at "Gwynfa" is Mr. J. Rimmer, S.R.N., R.M.N., designated Principal. Miss F. Balfour, social worker at the clinics until 1/10/61, took over the post of Deputy Principal on that date.

Mr. T. R. Miles, part-time psychologist at our Bangor Clinic for many years, resigned from this post. He and Mr. Sants, his co-lecturer at University College, Bangor, will, however, make their services available as lecturers in the course of training which we provide at "Gwynfa."

Clinical and School Psychological Services.

Mr. L. Scobbie, Principal Psychologist, in his report on the activities of his department during 1961, points out that at the time of his appointment in December, 1960, Mr. Macdonald was the only other psychologist on the staff. It will be recalled that the five Education Authorities had agreed to a modified staffing arrangement under which they would appoint two psychologists, the Management Committee continuing to be responsible for the appointment of two others. The Local Authority appointments were made in due course; one of the appointees, Mr. Macdonald, had been on the clinical staff of our service and we were unable to fill the vacancy resulting from his transfer. The appointment of Mr. J. B. Edwards, who is Welsh-speaking, gave us a third, much-needed worker in the speciality, however, and the clinical and educational services of the area should benefit considerably.

Mr. Scobbie, in his report, further writes as follows:—

"As will be seen from the statistics, a great deal of time was spent during the first half of the year in clinical duties more appropriate to a therapist or a social worker than to a psychologist. Due to shortage of staff there was no alternative to this arrangement.

"In considering what might be done to assist our area in education, it is at once apparent that the common Child Guidance practice of school visits by the psychologist can have little of the value such visits could have in a more densely populated area. Indeed, in our area such visits have to be of such a nature that the psychologist may well convey to all educational staff the notion that he has an interest in individual children, which is, of course, perfectly correct, but I consider that they should additionally offer a service of more generally applicable professional advice complementing that of the Authority's inspector. With this general principle in mind, I wrote notes on a variety of subjects of interest to teachers. These met with a very favourable response. Some 350 schools requested to have them.

"In relation to 'Gwynfa' I initiated informal meetings with the trainee staff in order to allow them the opportunity for open discussion of any points

about maladjusted children which might be puzzling them. I hoped that in expressing their own anxieties about the work they would, by ventilating them, overcome them, so that there would be no repercussions on the children.

“ In December I attended a meeting with the Director of Education and Principal School Medical Officer of Denbighshire to discuss group testing of 7 year old children in Colwyn Bay. This testing was planned for late 1962, but I took the opportunity of this meeting to put forward the suggestion that I would hold a course of training in educational psychology and special teaching methods for teachers in the Colwyn Bay area. This offer was also made to the Director of Education for Anglesey and both Directors accepted it when the course was planned for 1962.

“ I would like to take this opportunity of thanking all the other members of the clinic staff for their assistance to us, and I would also like to thank the Authorities for the interest they have shown in our work.”

Research—Welsh Intelligence Scale for Children.

The research project into the adaptation of the “ Wechsler Intelligence Scale for Children ” for use with Welsh-speaking children entered its fifth and final year. It is expected that, for practical purposes, the work will be completed about the end of July, 1962.

The Welsh version of the test will then be fully validated and standardised, and made available for the assessment of individual children in the age range 6—15.

It should be noted that the test will have to be given and results interpreted by trained and experienced workers if it is to be an efficient instrument. It will be of particular interest to psychologists and medical officers in the National and Local Health and in the Education Services of Wales.

Residential Treatment.

“ Gwynfa,” our new residential clinic for the investigation and treatment of emotionally disturbed children, became ready for occupancy towards the end of the year. By that time we had been able to recruit staff and to give them an opportunity to get to know each other and to become acquainted with some of the more important aspects of their future work.

The number of beds available at “ Gwynfa,” about twenty, is probably near optimal for a centre of the kind envisaged. We shall, however, have to give considerable thought to problems relating to the rate of admission, the numbers in residence at any given time, and the nature and severity of the disturbances of the children whom we accept. We shall wish to be guided

by the views of the staff of "Gwynfa" as to their ability to cope with the many, often new and trying, tasks which they are likely to encounter, and to assess carefully to what extent the clinic staff can support their work. For the first year or so we shall probably restrict intake to ten to twelve children, aged under 12 or 13, and judged capable of responding to treatment in a period of time not normally exceeding nine months.

With regard to treatment, the staffs of "Gwynfa" and of the clinics have identical objectives. Our common aim is the return of the children to their own homes, if possible, with better prospects than before of being able to live socially useful and personally successful and satisfying lives. The ways in which the house and the clinic staffs make their respective contributions towards the achievement of this aim naturally differ in many respects, although they are complementary.

The staff of "Gwynfa" is mainly concerned with the day to day living of the children. They will aim to create a tolerant and permissive environment in which the children can feel free, firstly, to show how and where they have been hurt and, secondly, to accept what help towards their adjustment may be made available. If they are accepting of unusual behaviour and sympathetic in their attitudes they will offer to the children many opportunities to express feelings, perhaps normally unacceptable ones, and thus work through many of them. This would be part of the therapeutic process which forms the basis of all work at "Gwynfa."

The clinic staff, through the child therapists, provide active, direct treatment, generally more intensive, but otherwise identical with that provided at out-patient clinics. The social workers maintain contact with parents and guardians, frequency of interviews depending on the needs of the case and, in effect, amounting to treatment when required. The psychologists will advise on educational matters and undertake remedial teaching if necessary. They will also maintain or seek liaison with schools, especially in preparation for the children's return home.

The first "Two Year Course of Training," arranged jointly with University College, Bangor, was started with a group of seven trainee workers. A second group will begin their training in September, 1962. We shall, from then onwards, have a number of first and second year trainees working with the permanent staff of four five.

The practical help given by Mr. Rimmer, Principal, and other members of the staff towards the introduction of this course, and their contribution to the organisation of the work of "Gwynfa" as a whole, has been most valuable. We are looking forward to further expansion with confidence in the ultimate success of the venture.

INFORMATION AND DATA IN RESPECT OF CHILDREN.

(1) Sources of referral.

In the following table, which is self-explanatory, all children referred during the year are included. Not all of them could be examined.

Table 4a.

Referring Agency	Counties						
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Total
School Medical Officers	32	59	32	97	15	—	235
General Practitioners	3	22	17	9	2	1	54
Consultant Paediatricians	1	7	8	4	1	—	21
Other Medical Specialists	—	—	6	6	—	—	12
Education Officers & Teachers...	—	2	1	2	1	—	6
Courts and Probation Officers...	—	3	7	6	—	—	16
Children's Officers	—	1	12	1	—	—	14
Other Social Workers	—	7	10	1	—	—	18
Parents	1	3	3	1	—	—	8
All Agencies 1961... ..	37	104	96	127	19	1	384

On 31st December, 1960, 63 children were on the waiting list, 19 of these were cancelled later and 44 were transferred to 1961. Three hundred and eighty-four new referrals were received during 1961. Twenty-five of these were cancelled, 54 remained on the waiting list on 31st December, 1961.

The table of Referral Figures for the last ten years may be of interest.

Table 4b.

	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Total
1952	22(13)	54(40)	73(38)	38(4)	12(10)	—	199
1953	18(13)	60(42)	67(31)	28(4)	10(7)	—	183
1954	21(10)	76(50)	71(23)	51(15)	16(16)	—	235
1955	33(24)	106(75)	97(23)	63(22)	18(13)	2	319
1956	61(43)	126(77)	91(38)	63(28)	22(22)	1	363
1957	30(13)	117(75)	88(35)	67(23)	13(7)	—	315
1958	50(31)	108(62)	122(40)	112(47)	19(10)	15(1)	426
1959	60(45)	105(49)	97(34)	88(56)	16(13)	8	374
1960	44(16)	83(33)	94(25)	131(74)	21(17)	6(2)	379
1961	37(32)	104(59)	96(32)	127(97)	19(15)	1	384

All figures in the tables of this report refer to children dealt with individually. Children examined by means of group tests are not recorded here.

(2) Causes of referral.

The variety of difficulties for which children are referred may be gathered from Table 5, where they are, somewhat arbitrarily, sub-divided into those with a "clinical" and an "educational" bias.

Table 5.

(a) Behaviour, difficult and aggressive	56
(b) Stealing (14), Stealing and lying (3), Larceny (13), Larceny with cruelty (3), Truanting from home (1)	34
(c) Enuresis (14), Enuresis with other symptoms (4), Soiling (3), Soiling with other symptoms (2)	23
(d) Temper outbursts (4), Refusal to eat/sleep (2), Abnormal eating habits (2)	8
(e) Habit spasms (3), Night terrors (3), Sleep walking (2), Excessively fearful (3), Extremely nervous (5), Emotionally disturbed (4)	20
(f) Hysterical (3), Withdrawn (1), Depressed (2), Obsessional (2), Suicide threat/ attempt (2) ? Schizophrenia (2)	12
(g) Severe problems associated with sexual development (5), Assault (3)	8
(h) Various bodily symptoms, no adequate physical cause discovered: Headaches (2), Abdominal pains (2), Deafness (1), Over-breathing (1), Shortage of breath (2)	8
(i) Stammer, stutter (4), Other speech defects (5), Speech difficulties with other symptoms (3), Asthma (4), Colitis (1)	17
(p) Marked reluctance or refusal to attend school (14), Severe nervousness related to school attendance (6), Truanting from school (3)	23
(k) Educational difficulties, child assumed of good intelligence (19), For intelligence tests and/or assessment of educational potential (125)	144
(l) For assessment: Child with organic brain disorder (3), Child physically handi- capped (3), "Child living with guardians" (12)	18
(m) Parent Guidance: Child in own home (3), Child in adoptive home (1), Child in foster home (9)	13
	—
	384
	—

Some Observations on Table 6.

(1) Likely scholastic success.

The children in the various I.Q. ranges used may be expected to succeed in their scholastic careers in keeping with the following observations:—

I.Q.—Under 55 Training, rather than education in the sense in which this word is normally used, likely to be of greatest value.

55 to 69... .. In need of the educational and general social facilities of a school or special unit for educationally sub-normal children.

70 to 84... .. In need of education in a special class.

85 to 114 Of low average, average and high average ability.

115 to 129 Of superior ability.

130 and over ... Of outstanding ability.

(2) Value of “I.Q. Figure.”

An “I.Q. figure” has only a limited value. It is used to express the result of a test given to a child, but it does not represent all that could be said about his intelligence and his abilities.

Group tests and non-verbal and performance tests can give extremely valuable information, but this needs careful and expert interpretation. Whenever necessary, they must be followed by individual tests and supplemented by whatever special tests may be available for the examination of specific abilities or disabilities.

In work with emotionally disturbed children, individual tests are given. Observation in the “standard test situation,” and interpretation of his behaviour there, assumes considerable importance. The value which can safely be attached to the test results, and the conclusions for the future which may be drawn, may even then have to await the decision of the “case conference” at which all workers involved will each discuss their findings and views.

(4) Diagnoses.

The seriousness, or otherwise, of the conditions with which we are asked to deal, may be estimated from Table 7 which follows. In this, the children who were first examined during 1961, and on whom investigations were completed during the year, are grouped in broad diagnostic categories according to their ages.

Table 7.

Diagnostic Groups and Age Ranges	Under 5	5—7	7—10	10—12	12—15	15	All Ages
A—Behaviour and Personality Difficulties							
1—Behaviour Disorder, simple... ..	—	1	3	—	7	1	12
Behaviour Disorder, with neurotic traits	5	6	16	10	12	1	50
Behaviour Disorder, with anti-social traits	—	—	9	6	12	4	31
Behaviour Disorder, with epilepsy/poliomyelitis	—	—	2	2	1	—	5
2—Adolescent Instability... ..	—	—	—	—	2	5	7
3—Neurotic illness (Neurosis)	—	3	23	15	17	5	63
Depressive illness	—	2	—	3	2	2	9
Serious Disorder of Personality—							
Development	2	1	4	—	4	4	15
Psychosis	—	—	1	1	1	—	3
B—Educational or Intellectual Difficulties:							
Children of average and above average intelligence:							
No specific defect	—	1	6	17	7	—	31
With speech defect, deaf and dumb	—	—	1	1	—	—	2
Dull children (I.Q. 70-84)	—	—	17	19	9	—	45
Dull children with epilepsy/spasticity/deafness/speech defect	1	1	2	—	—	—	4
Very dull children (I.Q. 55-69)	—	1	16	15	11	—	43
Very dull children with severe emotional instability	2	—	—	1	—	—	3
Educability in doubt	—	1	3	1	1	—	6
C—Unsuitable for Education:							
(Sub-normal children)	1	—	2	—	2	—	5
D—Essentially Normal Children:							
Vocational Guidance	2	—	3	1	1	—	7
Parent Guidance	2	—	1	—	—	—	3
E—Diagnosis Pending	1	—	1	3	—	—	5
Total number of Children	16	17	110	95	89	22	349

STATISTICS OF ATTENDANCES.

In the following tables information is given in respect of:—

- 1—The number of INDIVIDUAL CHILDREN who were dealt with during 1961 and the workers concerned in their cases.
- 2—The numbers of ATTENDANCES AT CLINICS which were recorded for each worker.
- 3—The numbers of VISITS to homes, schools and other social agencies which were made by the Psychologist and the Psychiatric Social Workers.
- 4—The nature of the investigations carried out by the Psychologist.

Note: 1—The numbers of children who were assessed by means of GROUP TESTS at schools are NOT recorded in these tables.

2—“Correspondence only” cases are not included either. They come from “open” and from otherwise “closed” files, are very numerous and, often, very time consuming.

SUMMARY of attendances and visits.

	First	Further	Total
1—(a) Attendances of children at clinics... ..	232	1304	1536
(in returns to the Regional Hospital Board one attendance only can be registered, even if two or more workers have interviewed the child and one or more adults on a particular occasion).			
(b) Examination of children elsewhere... ..	117	—	117
2— Psychiatrists:—			
Attendances of new referrals (first)	194	—	
Attendances for treatment and re-examinations	—	647	841
Interviews with Mothers, Fathers or Guardians...	136	123	259
3— Psychologists:—			
Number of visits to schools			227
Interviews with children	275	529	804
Interviews with Mothers, Fathers or Guardians...	33	173	206
4— Psychiatric Social Workers:—			
Number of visits to homes			223
Number of visits to other social workers			24
Interviews with Mothers, Fathers or Guardians...	202	448	650

Table 8.

This table gives the numbers of individual children who were dealt with by one or more of the members of the clinic teams.

The figures refer to Psychiatrist and Registrar (1), Psychologist (2) and Psychiatric Social Worker (3).

Clinic	First dealt with during 1961						First dealt with before 1961						Total
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	
Bangor													
1	1	2	—	—	—	—	2	7	—	—	—	—	12
2	1	36	—	—	—	—	2	7	—	—	—	—	46
3	—	2	—	—	—	—	2	7	—	—	—	—	11
1+2	3	1	—	—	—	—	—	4	—	—	—	—	8
1+3	—	5	—	—	—	—	4	6	—	—	—	—	15
2+3	2	1	—	—	—	—	—	1	—	—	—	—	4
1+2+3	8	22	—	—	—	—	—	2	—	—	—	—	32
Blaenau Ffestiniog													
2	—	—	—	—	—	—	—	—	—	—	6	—	6
3	—	—	—	—	1	—	—	—	—	—	3	2	6
1+2	—	1	—	—	12	—	—	1	—	—	1	—	15
2+3	—	—	—	—	3	—	—	1	—	—	2	1	7
1+2+3	—	—	—	—	1	—	—	—	—	—	2	—	3
Colwyn													
1	—	2	1	1	—	—	—	1	1	—	—	—	6
2	—	3	2	—	1	—	—	1	3	—	—	—	10
3	—	2	2	—	—	—	—	4	5	—	—	—	13
1+2	—	1	—	1	—	—	—	2	—	—	—	—	4
1+3	—	3	2	—	—	—	—	4	—	—	—	—	9
2+3	—	2	4	—	—	—	—	1	1	—	—	—	8
1+2+3	—	12	10	1	—	—	—	2	1	—	—	—	26
Holyhead													
2	5	—	—	—	—	—	—	—	—	—	—	—	5
3	—	—	—	—	—	—	2	—	—	—	—	—	2
1+2	3	—	—	—	—	—	5	—	—	—	—	—	8
2+3	5	—	—	—	—	—	1	—	—	—	—	—	6
1+2+3	2	—	—	—	—	—	—	—	—	—	—	—	2
Rhyl													
1	—	—	—	1	—	—	—	—	—	—	—	—	1
2	—	—	—	59	—	—	—	—	—	2	—	—	61
3	—	—	—	2	—	—	—	—	—	4	—	—	6
1+2	—	—	—	1	—	—	—	—	—	—	—	—	1
1+3	—	—	1	5	—	—	—	—	2	5	—	—	13
2+3	—	—	—	2	—	—	—	—	—	4	—	—	6
1+2+3	—	—	4	27	—	—	—	—	1	4	—	—	36
Shotton													
1	—	—	—	—	—	—	—	—	—	1	—	—	1
1+2	—	—	—	—	—	—	—	—	—	1	—	—	1
1+3	—	—	—	1	—	—	—	—	—	5	—	—	6
2+3	—	—	—	—	—	—	—	—	—	1	—	—	1
1+2+3	—	—	—	1	—	—	—	—	—	—	—	—	1
Wrexham													
1	—	—	1	—	—	—	—	—	8	1	1	—	11
2	—	—	5	3	1	—	—	—	4	1	3	—	17
3	—	—	7	—	—	—	—	—	4	—	—	—	11
1+2	—	—	4	—	—	—	—	—	—	1	—	—	5
1+3	—	—	6	—	—	—	—	—	8	3	1	—	18
2+3	—	—	3	—	1	—	—	—	3	1	1	—	9
1+2+3	—	—	34	9	3	1	—	—	2	2	—	—	51
Totals	30	95	86	114	23	1	18	51	43	36	20	3	
	349						171						520

Tables 9a and 9b refer to work of the PSYCHOLOGISTS.

Table 9a.
Interviews with **children** only (in brackets, number of individual children).

Clinic	First Attendances (Referrals)						Further Attendances (Re-examinations and Treatments)						Number of Attendances		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total
Bangor															
Boy	8	16	—	—	—	—	15(4)	75(14)	—	—	—	—	24	90	187
Girl	4	14	—	—	—	—	2	53(10)	—	—	—	—	18	55	
Blaenau Ffestiniog															
Boy	—	—	—	—	9	—	—	—	—	—	26(5)	—	9	26	80
Girl	—	1	—	—	4	—	—	4	—	—	36(4)	—	5	40	
Colwyn															
Boy	—	11	9	2	—	—	—	20(4)	6(4)	—	—	—	22	26	107
Girl	—	7	4	1	—	—	—	44(5)	3(2)	—	—	—	12	47	
Holyhead															
Boy	4	—	—	—	—	—	37(7)	—	—	—	—	—	4	37	49
Girl	1	—	—	—	—	—	7	—	—	—	—	—	1	7	
Rhyl															
Boy	—	—	4	20	—	—	—	—	11(4)	32(7)	—	—	24	43	123
Girl	—	—	1	14	—	—	—	—	21(2)	20(8)	—	—	15	41	
Shotton															
Boy	—	—	—	1	—	—	—	—	—	52(8)	—	—	1	52	72
Girl	—	—	—	1	—	—	—	—	—	18(3)	—	—	1	18	
Wrexham															
Boy	—	—	28	7	2	1	—	—	41(15)	11(4)	16(2)	1	38	69	223
Girl	—	—	17	2	1	—	—	—	42(5)	41(4)	13(2)	—	20	95	
All Clinics	17	49	63	48	16	1	61	196	124	174	91	1	194	647	841

Table 9b.

Interviews with Parents, Guardians and other Social Workers (in brackets, number of individual adults).

Clinic	First Interviews						Further Interviews						Totals		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total
Bangor															
Mothers ...	4	17	—	—	—	—	11(2)	21(6)	—	—	—	—	21	32	67
Fathers ...	2	6	—	—	—	—	2(2)	—	—	—	—	—	8	3	
Others ...	1	—	—	—	—	—	—	2(2)	—	—	—	—	1	2	
Blaenau Ffestiniog															
Mothers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Others ...	—	—	—	—	1	—	—	—	—	—	—	—	1	—	
Colwyn															
Mothers ...	—	11	7	1	—	—	—	4(3)	—	—	—	—	19	4	35
Fathers ...	—	4	2	1	—	—	—	1	—	—	—	—	7	1	
Others ...	—	1	2	—	—	—	—	—	1	—	—	—	3	1	
Holyhead															
Mothers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Fathers ...	—	—	—	—	—	—	2(2)	—	—	—	—	—	—	2	
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Rhyl															
Mothers ...	—	—	5	24	—	—	—	—	6(2)	20(5)	—	—	29	26	65
Fathers ...	—	—	—	7	—	—	—	—	—	3(3)	—	—	7	3	
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Shotton															
Mothers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Others ...	—	—	—	—	—	—	—	—	—	2	—	—	—	2	
Wrexham															
Mothers ...	—	—	25	2	2	1	—	—	22(8)	5(2)	13(2)	1	30	41	87
Fathers ...	—	—	4	1	—	—	—	—	—	—	—	—	5	—	
Others ...	—	—	5	—	—	—	—	—	5(4)	1	—	—	5	6	
Totals ...	7	39	50	36	3	1	15	29	34	31	13	1	136	123	259

Tables 10a, 10b and 10c refer to work of the PSYCHOLOGISTS.

Table 10a.
Interviews with **children** only (in brackets, number of individual children).

Clinic	First Examination							Further Examinations							Number of Examinations		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total		
Bangor Boy Girl	7 4	38 22	— —	— —	— —	— —	15(3) 6(3)	99(12) 55(5)	— —	— —	— —	— —	45 26	114 65	250		
Blaenau Ffestiniog Boy Girl	— —	— 1	— —	— —	6 3	— —	— —	— —	— —	— —	2(2) 3(3)	— —	6 4	2 3	15		
Colwyn Boy Girl	— —	8 4	9 4	3 —	1 —	— —	— —	28(4) 9(3)	24(6) —	— —	— —	— —	21 8	52 9	90		
Holyhead Boy Girl	11 1	— —	— —	— —	— —	— —	17(5) —	— —	— —	— —	— —	— —	11 1	17 —	29		
Rhyl Boy Girl	— —	— —	3 2	57 29	— —	— —	— —	— —	4 —	36(6) 61(6)	— —	— —	60 31	40 61	192		
Shotton Boy Girl	— —	— —	— —	1 —	— —	— —	— —	— —	— —	— 7	— —	— —	1 —	— 7	8		
Wrexham Boy Girl	— —	— —	31 15	8 3	2 1	1 —	— —	— —	122(13) 3(3)	33(3) —	— 1	— —	42 19	155 4	220		
Totals ...	23	73	64	101	13	1	38	195	153	137	6	—	275	529	804		

Table 10b.

Interviews with Parents, Guardians and other Social Workers (in brackets, number of individual adults).

Clinic	First Interviews						Further Interviews						Totals		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total
Bangor															
Mothers ...	2	1	—	—	—	—	3(2)	26(4)	—	—	—	—	3	29	47
Fathers ...	—	1	—	—	—	—	—	11	—	—	—	—	1	11	
Others ...	1	—	—	—	—	—	1	1	—	—	—	—	1	2	
Blaenau Ffestiniog															
Mothers ...	—	1	—	—	11	—	—	4(2)	—	—	54(8)	—	12	58	74
Fathers ...	—	—	—	—	—	—	—	—	—	—	4(2)	—	—	4	
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Colwyn															
Mothers ...	—	—	2	—	1	—	—	10(3)	3(2)	—	—	—	3	13	19
Fathers ...	—	—	1	—	1	—	—	1	—	—	—	—	2	1	
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Holyhead															
Mothers ...	4	—	—	—	—	—	29(6)	—	—	—	—	—	4	29	46
Fathers ...	1	—	—	—	—	—	5(2)	—	—	—	—	—	1	5	
Others ...	—	—	—	—	—	—	7	—	—	—	—	—	—	7	
Rhyl															
Mothers ...	—	—	—	3	—	—	—	—	—	1	—	—	3	1	4
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Shotton															
Mothers ...	—	—	—	—	—	—	—	—	—	8	—	—	—	8	11
Fathers ...	—	—	—	—	—	—	—	—	—	3	—	—	—	3	
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Wrexham															
Mothers ...	—	—	2	—	—	—	—	—	2(2)	—	—	—	2	2	5
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Others ...	—	—	1	—	—	—	—	—	—	—	—	—	1	—	
Totals ...	8	3	6	3	13	—	45	53	5	12	58	—	33	173	206

Table 10c.

Not at Clinics									
Visits	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Total		
To Schools—Children discussed with teachers...	11	49	38	100	12	2	212		
To Schools and Officials of Authority re. special testing of children	2	6	6	1	—	—	15		
Total number of visits ...							227		

Tables 11a and 11b refer to work of the PSYCHIATRIC SOCIAL WORKERS.

Table 11a.

Interviews with Parents, Guardians and other Social Workers

Clinic	First Interviews						Further Interviews						Totals		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total
Bangor															
Mothers ...	8	26	—	—	—	—	9(5)	65(18)	—	—	—	—	34	74	134
Fathers ...	4	7	—	—	—	—	3(2)	8(4)	—	—	—	—	11	11	
Others ...	—	1	—	—	—	—	—	3(2)	—	—	—	—	1	3	
Blaenau Ffestiniog															
Mothers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Colwyn															
Mothers ...	—	15	11	2	—	—	—	47(12)	19(11)	—	—	—	28	66	114
Fathers ...	—	4	2	2	—	—	—	2(2)	1	—	—	—	8	3	
Others ...	—	3	3	—	—	—	—	2	1	—	—	—	6	3	
Holyhead															
Mothers ...	6	—	—	—	—	—	3(3)	—	—	—	—	—	6	3	9
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Rhyl															
Mothers ...	—	—	5	31	—	—	—	—	19(5)	54(18)	—	—	36	73	132
Fathers ...	—	—	1	5	—	—	—	—	2	14(4)	—	—	6	16	
Others ...	—	—	—	1	—	—	—	—	—	—	—	—	1	—	
Shotton															
Mothers ...	—	—	—	3	—	—	—	—	—	55(9)	—	—	3	55	63
Fathers ...	—	—	—	—	—	—	—	—	—	4(2)	—	—	—	4	
Others ...	—	—	—	—	—	—	—	—	—	1	—	—	—	1	
Wrexham															
Mothers ...	—	—	34	8	3	1	—	—	77(28)	34(6)	17(4)	—	46	128	198
Fathers ...	—	—	5	2	—	—	—	—	4(4)	2(2)	—	—	7	6	
Others ...	—	—	9	—	—	—	—	—	2(2)	—	—	—	9	2	
Totals ...	18	56	70	54	3	1	15	127	125	164	17	—	202	448	650

Table 11b.

Not at Clinics							
Visits	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Total
Home Visits	17	50	89	36	28	3	223
Visits to other Social Workers... ..	1	7	9	1	6	—	24
Total number of visits							247

CONCLUSION.

Once again I wish to record my appreciation of the goodwill towards our work shown by medical specialists, general practitioners, and the personnel of medical, educational, social and community services.

The Principal School Medical Officers and the Principal Education Officers have continued to give us every help. Our work could not be carried out successfully without their sympathetic attitude towards our endeavours and their co-operation with us. We are deeply indebted to them.

Dr. J. H. O. Roberts has, as always, given me his advice and his support whenever needed. I am very grateful to him.

To Mrs. E. Wyn Jones, Chairman, and to members of the Child Guidance Sub-Committee I wish to express my thanks for the consideration they have shown me and for their practical assistance, especially in relation to the opening of “Gwynfa.”

To you, Mr. Chairman, Ladies and Gentlemen, I would convey my sincere appreciation of your unfailing support and your very real interest in the Child Guidance Services.

Your obedient Servant,

E. SIMMONS,

Medical Director and
Consultant Child Psychiatrist

September, 1962.

SUMMARY OF GROUP EXPENDITURE

NORTH WALES MENTAL HOSPITAL MANAGEMENT COMMITTEE.

YEAR ENDED 31/3/62.

Revised Estimate 1961-62	Head of Expenditure	Previous Year 1960-61	Actual 1961-62	% of Gross Expend.
£	Salaries and Wages :	£	£	
9820	Medical	10237	9183	1.03
263250	Nursing	245784	263017	29.61
43604	Works and Maintenance	40015	44356	4.99
33850	Admin. and Clerical	30152	33256	3.74
22550	Professional and Technical	126723	22350	2.51
120850	Other Staff		121836	13.7
493924	Total Salaries	452911	493998	55.58
121700	Provisions	117762	118035	13.29
21390	Uniforms and Clothing	18440	23930	2.69
23800	Drugs, Dressings, Medical and Surgical Appliances and Equipment	19994	21217	2.38
62480	Fuel, Light, Heating, Water, Cleaning and Laundry	58508	61580	6.93
29100	Maintenance of Buildings, Plant and Grounds	33425	33368	3.75
23020	Domestic Repairs, Renewals and Re- placements	21929	27174	3.06
103650	All other Expenses	101437	109459	12.32
879064	Gross Expenditure	824406	888761	100.00
78790	Deduct Direct Credits	81142	84904	
800274	Net Hospital Revenue Expenditure	743264	803857	
500	Central Administration	395	567	
800774	Total Expenditure of H.M.C.	743659	804424	

